U.S. Potent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a yalid CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Humber Substitute for Form PTO-876 Effective December 8, 2004 01 APPLICATION AS FILED - PART I (Column 1) OTHER THAN (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIC FEE RATE (1) FEE (S) RATE (\$ (37 CFR 1.16(a), (b), or (c)) NA NA 150.00 SEARCH FEE NA 300.00 - N/A (37 CFR 1 16(K) (), or (m)) NA NA \$250 EXMINATION FEE N/A \$500 (3) CFR 1.16(0), (p), or (q)) NÀ NA NA \$100 TOTAL CLAMS NIA \$200 (37 CFR 1.16(I)) minus 20 = X\$ 25 INDEPENDENT CLAMS 1 X\$50 OR (37 CFR 1.16(h)) minus 3 = X100 If the specification and drawings exceed 100 X200 APPLICATION SIZE . sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) +180= +360= "Mihe difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY OR CLAIMS HIGHEST SMALL ENTITY REMAINING NUMBER PRESENT. RATE (\$) AFTER 四 ADDI-PREVIOUSLY **EXTRA** RATE (\$) MENDMENT ADOL TIONAL PAID FOR TIONAL FEE (\$) Minus ENDM FEE (\$) X\$ 25 Independent profe 1.16(1) X\$50 Minus. 3 X100 Application Size Fee (37 CFR 1.16(s)) X200 ÖR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω REMAINING NUMBER PRESENT RATE (\$) AFTER PREVIOUSLY ADDI-EXTRA RATE (\$) MENDMENT. ADDI-PAID FOR TIONAL ũ Total pr cfr 1.16(1) TIONAL FEE (\$) ENDM Minus FEE (1) X\$ 25 independent ... pr CFR 1.16(1)) X\$50 Minus OR' = X100 Application Size Fee (37 CFR 1.16(6)) X200. OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)

* If the entry in column 1 is less than the entry in column 2; write "0" in column 3.

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This "Highest Number Previously Paid For" (Total or Independent) is the highest number (ound in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to life (and by the bookuling pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

+180=

ADD'L FEE

TOTAL

+360=

ADD'L FEE

TOTAL

OR

OR